

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PW	67814	10/6/65
O.I.P.E. CLASSIFIER		6930	10-7-99
FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	10/10/65
1	✓ ✓ ✓ ✓ ✓ ✓ ✓
2	✓ ✓ ✓ ✓ ✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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